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FACSIMILE TRANSMITTAL

TO:

Name: Mail Stop AMENDMENT
Group Art Unit 3764/Examiner Michael Brown

Firm: U.S. Patent & Trademark Office

Fax No.: 571-273-8300

Subject: U.S. Patent Application No. 09/605,001
Gary Karlin Michelson
Filed: June 27, 2000
APPARATUS AND METHOD OF INSERTING
SPINAL IMPLANTS

Attorney Docket No. 101.0044-04000

Customer No. 22882

Confirmation No.: 5171

FROM:

Name: Thomas H. Martin, Esq.

Phone No.: 330-877-2277

No. of Pages (including this): 14

Date: November 29, 2005

Confirmation Copy to Follow: NO

Message:

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that the attached Transmittal Form (in duplicate; \$1,020.00 total amount to cover the three-month extension fee is to be charged to Deposit Account No. 50-1068) and Amendment are being facsimile transmitted to the U.S. Patent and Trademark Office on November 29, 2005.


Sandra L. Blackmon

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FORM PTO-1083

NOV 29 2005

Attorney Docket No.: 101.0044-04000

Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Gary Karlin Michelson

Serial No.: 09/605,001

Filed: June 27, 2000

For: APPARATUS AND METHOD OF
INSERTING SPINAL IMPLANTS

Confirmation No.: 5171

Group Art Unit: 3764

Examiner: Michael Brown

Mail Stop AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment in reply to the Office Action dated June 14, 2005 in the above-identified application.

☐ No additional fee is required.

☒ Applicant hereby requests a three-month extension of time to respond to the above office action.

The fee has been calculated as shown below:

The fee has been calculated as shown below:							
	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	28	-	28 **	0	LG=\$50 SM=\$25	\$50	\$ 0
INDEPENDENT CLAIMS FEE	10	-	10 ***	0	LG=\$200 SM=\$100	\$200	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180		\$ 0
TOTAL							\$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

☒ The total amount of \$1,020.00 to cover the three-month extension of time is to be charged to Deposit Account No. 50-1068.

☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1068. A copy of this sheet is enclosed.

☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

☒ Any patent application processing fees under 37 C.F.R. § 1.17

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Respectfully submitted,

MARTIN & FERRARO, LLP

Date: November 29, 2005

By:



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